FEC FORM

## STATEMENT OF ORGANIZATION

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FEC MAIL CENTER

FORIVI I							. F E ( Office Use O	MAIL CENTI
1. NAME OF COMMITTEE (in	full)	(Check if is change			ple:If typing, type the lines.	12FE4	M5	
DENNIS A	NDER	SON FO	R CO	NGR	ESS			
ADDRESS (number an	nd street)	P.O. BO	X 858	3 <b>7</b>				
(Check if address is changed)		GURNE	E				60031	<u></u>
				CITY		STATE	ZIP	CODE
COMMITTEE'S E-MA  (Check if is change	address	SS (Please provide	only one e		ress) <b>IFINANC</b> I	ES.COM	1 1 1 1 1	
COMMITTEE'S WEB	address	ORESS (URL)	DENN	IISAI	<b>IDERSO</b>	NFORC	ONGRE	SS.COM
2. DATE	M C	B <sup>r</sup> (f. 7) (17 <b>Y</b> 117 <b>Y</b> 117Y);	¥ 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	: .				
3. FEC IDENTIFIC	ation nu	JMBER	C			·		
4. IS THIS STATEM	MENT 🔀	NEW (N)	OR		AMENDED (A)	)		·
I certify that I have e	xamined th	is Statement and	to the besi	t of my ki	nowledge and belie	ef it is true, cor	rect and complet	е.
Type or Print Name	of Treasurer	BRETT	SMIL	_EY		white was the state of the stat	and the graph of the state of t	
Signature of Treasure	er I	5F5-)	_	••.		Date (	Z 06	70 (l'
NOTE: Submission of	•	• •			ect the person signi			of 2 U.S.C. §437g.
Office Use Only				1	For further Information Federal Election Communication Toll Free 800-424-9530 Local 202-694-1100	nission		FORM 1 d 02/2009)